

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001428

Entity Name: SEAHAWKS OF TAMPA BAY, INC.

FILED  
Apr 30, 2004  
Secretary of State

## Current Principal Place of Business:

COLEMAN JR. HIGH SCHOOL  
P.O. BOX 13284  
TAMPA, FL 336813284

## New Principal Place of Business:

## Current Mailing Address:

COLEMAN JR. HIGH SCHOOL  
P.O. BOX 13284  
TAMPA, FL 336813284

## New Mailing Address:

FEI Number: 59-3208265      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BOURASSA, DANIEL C JR.  
3111 FIELDER AVE.  
TAMPA, FL 33611      US

## Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

## OFFICERS AND DIRECTORS:

Title: D      ( ) Delete  
Name: BOURASSA, DANIEL C JR.  
Address: 3111 FIELDER AVE.  
City-St-Zip: TAMPA, FL 33611

Title: D      ( ) Delete  
Name: BROWN, JULIET E  
Address: 3325 S. MANHATTAN AVE.  
City-St-Zip: TAMPA, FL 33629

Title: S      ( ) Delete  
Name: BOURASSA, SANDRA  
Address: 3111 FIELDER AVE  
City-St-Zip: TAMPA, FL 33611

Title: D      ( ) Delete  
Name: SCHULZ, RICK  
Address: 3615 BELCHER DR  
City-St-Zip: TAMPA, FL 33629

Title: D      ( ) Delete  
Name: KELLEY, LINDA  
Address: 4118 W. SAN LUIS  
City-St-Zip: TAMPA, FL 33629

Title: D      ( ) Delete  
Name: CROOK, STUART  
Address: 4729 WALLACE AVE  
City-St-Zip: TAMPA, FL 33611

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JULIET BROWN

D

04/30/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date